

FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Ann Henigson
Name
 (2) 500 Three Islands Boulevard ,707
Address (number and street)
Hallandale Beach, Florida 33009
City, State, Zip Code

OFFICE USE ONLY
 08 SEP 29 AM 9:32

☐ CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es): City of Hallandale Beach Commissioner's Seat
☒ Candidate (office sought): for Election on November 4, 2008
☐ Political Committee ☐ CHECK IF PC HAS DISBANDED
☐ Committee of Continuous Existence ☐ CHECK IF CCE HAS DISBANDED
☐ Party Executive Committee ☐ CHECK IF NO OTHER ELECTIONEERING
☐ Electioneering Communication COMMUNICATION REPORTS WILL BE FILED

Report due: Oct. 3, 2008 (5) REPORT IDENTIFIERS
 (G 2 Report)
 Cover Period: From Sept / 13 / 2008 To Sept / 26 / 2008 Report Type G 2 Report

☒ Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash ~~XXXXXX~~ \$ 0 0 0 0
 Checks -None
 Loans (None) \$ 0 0 0 0
 Total Monetary \$ 0 0 0 0
 In-Kind (None) \$ 0 0 0 0

(7) EXPENDITURES THIS REPORT

Monetary
 Expenditures \$ 12.36
 Transfers to Office
 Account (None) \$ 0 0 0 0
 Total
 Monetary \$ 12.36

(8) Other Distributions

(None) \$ 0 0 0 0

(9) TOTAL Monetary Contributions To Date
 \$ 450.00

(10) TOTAL Monetary Expenditures To Date
 \$ 340.04

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Ann Henigson
☐ Individual only for electioneering committee ☒ Treasurer ☐ Deputy Treasurer

Sept 1 29 / 2008
 Signature Ann Henigson

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Ann Henigson
☒ Candidate ☐ Chairperson (only for PC, PT & electioneering committee)

Sept 129 / 2008
 Signature Ann Henigson

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Ann Hennigson

(2) I.D. Number _____

(3) Cover Period Sept / 13 / 2008 through Sept / 26 / 2008

(4) Page 1 of 1

Report due: Oct.3,2008- (G2 Report)

[illegible]

OS-DE 13 (Rev 08/03)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Ann Henigson

(2) I.D. Number _____

(3) Cover Period Sept. 13, 2008 through Sept. 26, 2008
 Report due: Oct. 3, 2008 (G2 Report)

(4) Page 1 of 1

(5) 2008 Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
Sept/ 29 / 2008	Ann Henigson 500 ThreeIslands Blvd Hallandale Beach Florida 3009	Reimburse Ann Check Henigson for No. Petty Cash 095 for costs. to Ann (posters, xeroxing, Henigson tape)		N/A	\$12.36
Total Expenditures.....					\$12.36
/ /					
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08 SEP 29 AM 9:32
 CITY OF HALLANDALE
 CITY CLERK